Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	04/02/14	Street:	1005 S Indianapolis Rd
Incident #:	14ISPC002721	Apt, Lot, Room #:	
County:	Boone	City:	Lebanon
Type of Laboratory Seizure (check one) Seizure Location (check all that app			n (check all that apply)
 ☐ Lab Seizure ☐ Chemical Seizure ☐ Equipment Seizure ☐ Dumpsite Seizure 		Residence Outbuilding Vehicle Other:	Business
Apt., hotel, multi-family dwelling: Shared HVAC: Yes No Unknown			
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)			
One Pot or Birch Reaction(s): Red Phosphorous/Iodine Reaction(s): Hydrochloric Acid Gas Generator(s): Flammable Solvents: Water Reactive Metal (Lithium):		Anhydrous Ammonia: Corrosive Acid: Corrosive Base: In Vehicle Ammonium Nitrate/Sulfate: Other (item and location):	
Child under age 18 discovered (check appropriate)			
No	(number present) not present but evidence they reside	unclea Estimated occurring:	length of time manufacturing had been
Vehicle, Travel Trailer, RV or Watercraft Information:			
Owner: VIN: Year:	MCCLAINE, MICHAEL J 1G1LV14WXJE673653 1988	Make: Model: Color:	<u>Chev</u> <u>Beretta</u> <u>Red</u>
This report has been faxed* or emailed to the following agencies that serve the location:			
Fire Department: Lebanon Fire Fax: Health Department County: Boone Co Fax: Department of Child Services Hotline: dcshotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Tom Egler Phone 317-234-4591			
*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of			

scene processing.